

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	SW	11	20512101
FORMALITY REVIEW	42	56-916	04-20-01
RESPONSE FORMALITY REVIEW	ph	1030	10-1-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	11/10/03
2	✓	✓	11/10/03
3	✓	✓	11/10/03
4	✓	✓	11/10/03
5	✓	✓	11/10/03
6	✓	✓	11/10/03
7	✓	✓	11/10/03
8	✓	✓	11/10/03
9	✓	✓	11/10/03
10	✓	✓	11/10/03
11	✓	✓	11/10/03
12	✓	✓	11/10/03
13	✓	✓	11/10/03
14	✓	✓	11/10/03
15	✓	✓	11/10/03
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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